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Thank you for your letter to the Secretary of

Thank you for your letter to the Secretary of State about the death of George Richardson. I am responding as the Minister with responsibility for service quality at the Department of Health.

I was sorry very to hear of Mr Richardson's death and would be grateful if you would pass on my condolences to his family.

Your report details and macceptable failure in patient care at Sunderland Royal Hospital and asked whether there was a need for national guidance on catheterisation, given the number of these procedures carried out within the NHS each year.

NHS England (NHSE) confirms that there are, at present, two sources of national guidance in the UK:

1. National Institute for Health and Care Excellence guidance - focussed on prevention of infection related to urethral catheters, which can be found at:

https://www.nice.org.uk/guidance/qs61/chapter/quality-statement-4-urinary-catheters#source-guidance-4.

2. The Royal College of Nursing (RCN) guidance - 'Catheter Care – RCN guidance for Nurses', which can be found at:

https://www.rcn.org.uk/ data/assets/pdf file/0018/157410/003237.pdf

The RCN publication aims to encourage further adoption of the National Occupational Standards (which describe best practice by bringing together skills, knowledge and values) across all NHS and independent health care sectors. National Occupational Standards may also be used as benchmarks for qualifications.

The guidance includes a suggested structure for gaining competence in catheterisation, including a comprehensive section on the importance of accurate documentation, which is clearly relevant to Mr Richardson's case.

We understand the British Association of Urological Nurses (BAUN) has chosen not to develop a separate national guideline on catheterisation to avoid duplication and potential confusion with both the RCN publication and the European Association of Urology Nurses (EAUN) guidance relating to all aspects of catheter care, published in 2012.

The EAUN guidelines, entitled 'Evidence-based Guidelines for Best Practice in Urological Health Care – Catheterisation, Indwelling catheters in adults - Urethral and Suprapubic' can be found at

www.baun.co.uk/index.php/download_file/view/304/226/

While neither of these publications advise on the number of attempts at recatheterisation prior to seeking specialist assistance from a urologist or urology nurse specialist, it is generally to be expected that senior/ specialist assistance should be sought when a clinician finds difficulty in any procedure.

The British Association of Urological Surgeons (BAUS) has advised that the issue of when and how to seek more senior help following repeated failed attempts at catheterisation is best managed by local, rather than national, guidance.

Appropriate national guidance already exists. Ensuring staff know of it, and how and when to seek help where catheterisation proves problematic, is for hospital Trusts to action locally. For the future, should BAUS determine a need for further national advice, NHS England would support its dissemination.

I have also passed your report to Anne Bishop, Chief Executive of BAUS, and to Fiona Sexton, the President of BAUN, who have been asked to write to you on this issue.

Thank you for bringing this matter to our attention

BEN GUMMER